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Substitute for form 1449/PTO

## INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet 1 of 5

Complete if Known					
Application Number	10/574,631				
Filing Date	January 31, 2007				
First Named Inventor	OSMAN N. OZES				
Art Unit	1614				
Examiner Name	Henley III, Raymond J.				
Attorney Docket Number	30481/30010				

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Examiner Initials*	Cite No.1	Document Number  Number-Kind Code <sup>2</sup> ( if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Wher Relevant Passages or Relevan Figures Appear
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	A46	US 5,279,949	01-18-1994	Board of Trustees operating	
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Examiner	 Date	
Signature	Considered	

Complete if Known Substitute for form 1449/PTO **Application Number** 10/574,631 **INFORMATION DISCLOSURE** Filing Date January 31, 2007 **STATEMENT BY APPLICANT** OSMAN N. OZES First Named Inventor 1614 Art Unit (Use as many sheets as necessary) Henley III, Raymond J. Examiner Name 2 of 5 30481/30010 Sheet Attorney Docket Number

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Examiner	Date	
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Complete if Known Substitute for form 1449/PTO Application Number 10/574,631 **INFORMATION DISCLOSURE** January 31, 2007 Filing Date STATEMENT BY APPLICANT OSMAN N. OZES First Named Inventor Art Unit 1614 (Use as many sheets as necessary) Henley III, Raymond J. Examiner Name 30481/30010 3 of 5 Sheet Attorney Docket Number

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	A95	US 6,541,447	04-01	-2003	-2003 B & M Healthcare Technologies,			
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Examiner	Cite			Dat	e	Name of Patentee or Applicant of Cited Document	Where Relevant Passages	
Initials*	No.¹	Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>5</sup>	(if known)	MM-DD-	·YYYY	Applicant of Cited Document	Or Relevant Figures Appear	لنا
	B1	EP 590,267		05-08-	2002	Bristol-Myers Squibb		
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	B2	WO 1990/04036		04-19-	1990	Medical Research Council		11
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		WO 1993/10076				University of Mississippi		$\square$
	B6	WO 1993/23555				The Penn State Research Foundation		
	B7	WO 1994/07876				Rhone-Poulenc Rorer S.A		Ш
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	B11	WO 1997/03106				Shearwater Polymers, Inc.		
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Examiner	Date	
Signature	Considered	

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				Application Number	10/574,631	
11	NFORMATION	I DI	SCLOSURE	Filing Date	January 31, 2007	
STATEMENT BY APPLICANT				First Named Inventor	OSMAN N. OZES	
				Art Unit	1614	
(Use as many sheets as necessary)			necessary)	Examiner Name	Henley III, Raymond J.	
Sheet	heet 4 of 5		5	Attorney Docket Number	30481/30010	

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. \* CITE NO.: Those application(s) which are marked with an single asterisk (\*) next to the Cite No. are not supplied (under 37 CFR 1.98(a)(2)(iii)) because that application was filed after June 30, 2003 or is available in the IFW. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at <a href="https://www.uspto.gov">www.uspto.gov</a> or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
	C1	AUERBACH et al., "Assays for Angiogenesis: A Review", Pharmac. Ther., 51:1-11, 1991.	
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Signature

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				Application Number	10/574,631	
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S	STATEMENT BY APPLICANT			First Named Inventor	OSMAN N. OZES	
				Art Unit	1614	
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<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>&</sup>lt;sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.

Examiner	Date	·
Signature	Considered	